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Btw

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Attorney Docket No.:
62732.000117

In re Application Of Richard Bruce RODEN et al.
Application Number 09/805,177
Filed March 14, 2001
For IMMUNOGENIC OVARIAN CANCER GENES

Group Art Unit 1642
Examiner S. L. Rawlings

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.

The requested extension and appropriate fee is as follows:

- | | Large Entity | Small Entity | Amount |
|---|--------------|--------------|-----------------|
| <input type="checkbox"/> One Month | \$ 120.00 | \$ 60.00 | \$ |
| <input checked="" type="checkbox"/> Two Month | \$ 450.00 | \$ 225.00 | \$225.00 |
| <input type="checkbox"/> Three Month | \$ 1,020.00 | \$ 510.00 | \$ |
| <input type="checkbox"/> Four Month | \$ 1,590.00 | \$ 795.00 | \$ |
| <input type="checkbox"/> Five Month | \$ 2,160.00 | \$1,080.00 | \$ |
- ☒ Applicant claims small entity status. See 37 CFR 1.27.
☒ A check in the amount of the fee is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. **50-0206**. A duplicate of this sheet is attached.
- I am the ☐ applicant/inventor.
☐ assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).;
☒ attorney or agent of record.
☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

December 9, 2004

Date

Signature

Laurence H. Posorske

Typed or Printed Name

34,698

Registration Number (if applicable)

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of _____ form(s) is/are submitted.

12/10/2004 HDEMSS1 00000057 09805177

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